## IN THE UNITED STATES DISTRICT COLL. FOR THE DISTRICT OF SOUTH CAROLINA Can Non-Prisoner Complaint Form

[Enver the full name of the plaintiff in this action]  Ony Lingry Brant	) Civil Action No. ) 2:14-cv-1132-DCN-BHI ) (to be assigned by Clerk)	<sup>2014</sup> MAR 25 H	P 1: 29
V.	) )		
[Enter the full name of each defendant in this action. If possible, please list only one defendant per line.]	) ) )		
Governor Wikk, Haley	) )		
SC Department of Revenue	) )		
Word Charleston Police Department	) )		
Officer Daniel Lyan Green (NGO)	) )		
	) )		
	)		
	)		
	) )		
	) )		
	,		
If allowed by statute, do you wish to have a trial by [If any answer requires additional space, please use addi I. PREVIOUS LAWSUITS  A. Have you begun other lawsuits in state or federaction?	itional paper and attach heret		ed in this
Yes No			
B. If your answer to A is Yes, describe the lawsuit another sheet of paper using the same outline.]		than one lawsu	it, describe on
1. Parties to this previous lawsuit: Plaintiff:			
Defendant(s): 2. Court:			

(If federal court, name the district; if state court, name the county)
3. Docket Number:
4. Name(s) of Judge(s) to whom case was assigned:
5. Status of Case:
6. Date lawsuit was filed:
7. Date of disposition (if concluded):
C. Do you have any other lawsuit(s) pending in the federal court in South Carolina?
Yes No
PARTIES
In Item A below, place your name and address in the space provided. [If additional plaintiffs, do the same of another sheet of paper.]
A. Name of Plaintiff: Wary Lingred Bright
Address: 7658 Stonehauen Drive North Charleston Sc 2942
In Item B below, place the full name of the defendant, and his/her/its address, in the space provided. Use Item C for additional defendants, if any.
B. Name of Defendant: GOVENOR WIKE R. Haley
Address: 12\$5 Vendlefon St. Columbia SC 29201
C. Additional Defendants (provide the same information for each defendant as listed in Item B above):
Officer Daniel Ryan Greene
2600 City Hall Gover anc
North Charleston Sc 2940 6
City of North Charleston Police Deportment
7500 City 19/1 Lane
North Charleston SZ 29406

## III. STATEMENT OF CLAIM

II.

State here, as briefly as possible, the facts of your case. Describe how each defendant is involved.

III.	STATEMENT OF CLAIM - continued.
	Governor Nikki Haley is overall is possible for
	not 1955ing legislation that 41th martely led to
	Desoral information becoming comprom sed, such
	as my tax in bimation and my social security
	number, the Department of Kevenye is lesponsible
	because they are the agency that is responsible for
ochecho)	me two intermetion and so Gigl Se curity number
101 19 119	bearing companised. The City of North Charlester
	Police Department is Overall 1850 on Sible For the
	Conduct of Heir officers. Officer Ucniel Ryan
	Treene talsely alressted me. The transport atticer
	when I was being hemsported (falsely) to jail. She
	when I was being transported (falsely) to jail. She
	was making turns that laused me to stide all over
	the backseat, Also, Govern Nikli, Hafey did not
	provide the funding that was he cess any to project
	citizens like my seff. When officer Damel Ryan
	Grang to Kole Cuss Lod mo, ho which ed mu a Vil
	ing has and acted as a command by molestone my
	hulfo CKS.

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IV.

RELIEF.
State briefly and exactly what you want this court to do for you.
I declare under penalty of perjury that the foregoing is true and correct.
Signed this 25th day of March, 2014.
Oly Signature of Plaintiff
Signature of Plaintiff